

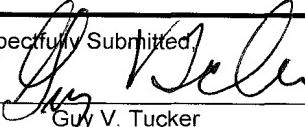
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Tarara et al.	Group No: 1611
Application No: 09/886,296	Examiner: Sharmila Gollamudi Landau
Confirmation No: 6348	Attorney Docket No: NK. 0054.10
Filed: June 21, 2001	August 22, 2008
Title: ENGINEERED PARTICLES AND METHODS OF USE	San Francisco, California 94107

Commissioner for Patents VIA EFS	Extension of Time		
Papers Enclosed <input checked="" type="checkbox"/> Amendment in Response to Non-Final Office Action <input type="checkbox"/> Declaration <input type="checkbox"/> Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> Modified SB08 Form <input type="checkbox"/> Cited References (Box) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return	Extension (Months)	Extension Fee	
		Large Entity	Small Entity
	<input checked="" type="checkbox"/> One Month	\$120.00	\$60.00
	<input type="checkbox"/> Two Months	\$460.00	\$230.00
<input type="checkbox"/> Three Months	\$1050.00	\$525.00	
Total \$ 120.00			
<input type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.			

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	44	46	9	\$50.00	\$25.00	\$0.00
Independent Claims	2	5	0	\$210.00	\$105.00	\$0.00
Multiple Dependent Claims				\$370.00	\$185.00	\$0.00
Supplemental Information Disclosure Statement						
						Total
						\$0.00

Fee Payment		Fee Deficiency
Extension Fees	\$120.00	<input type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> .
		and/or
Total	\$120.00	<input type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u> .

<input type="checkbox"/> Attached is check no. _____ in the sum of <u>\$0.00</u> . <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>10-0258</u> in the sum of <u>\$120.00</u>		Please direct telephone calls to: Guy V. Tucker at (415) 538-1555 Please send correspondence to: Janah & Associates, P.C. 650 Delancey Street, Suite 106 San Francisco, CA 94107	
CERTIFICATE OF TRANSMISSION (37 C.F.R. '1.8a) I hereby certify that this correspondence is being or deposited with the U.S. Postal Service as first class mail with sufficient postage, in a box addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, facsimile transmitted to the U.S. Patent Office via Fax No. (571) 273-8300, or electronically filed via EFS, on the date shown below.		Respectfully Submitted  By: <u>Leslie J. Mills</u> Date: <u>August 22, 2008</u> Date: <u>August 22, 2008</u> Leslie J. Mills Guy V. Tucker Registration No. 45,302	